

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S-2		05-02-01
O.I.P.E. CLASSIFIER		71	5/22/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	S-A	1082	06/21/01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	G S 3 4
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	0 0 0 ✓
12	✓ ✓
13	0
14	0 ✓
15	✓ ✓ ✓
16	0 0 = ✓
17	✓ ✓ ✓ ✓
18	0 ✓
19	0
20	0 ✓
21	✓ ✓ ✓ ✓
22	0 ✓
23	✓ ✓
24	✓ ✓
25	✓ ✓
26	✓ ✓
27	0 0
28	✓ ✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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